

# ARIZONA CORPORATION COMMISSION

4700

### UTILITY COMPLAINT FORM

Investigator: Deb Reagan

Phone:

Fax:

Priority: Respond Within Five Days

Opinion

No. 2006 - 50319

Date: 3/10/2006

**Complaint Description:** 

08A Rate Case Items - Opposed

First:

Last:

Complaint By:

Michael

Coughlin

**Account Name:** 

Michael Coughlin

Home: (000) 000-0000

Street:

Work:

City:

Phoenix

ΑZ

CBR:

State:

**Zip:** 85032

is:

**Utility Company.** 

Arizona Public Service Company

Division:

Electric

**Contact Name:** 

For assignment

Contact Phone: (602) 000-0000

# **Nature of Complaint:**

\*\*\*\*\*E-01345A-05-0816\*\*\*\*\*

Customer is opposed to the proposed rate increase requested by APS. Customer is opposed to the PSA surcharge increases. Customer is opposed to these charges incurred last year being passed on to customers who did not have APS service last year.

\*End of Complaint\*

### **Utilities' Response:**

# Investigator's Comments and Disposition:

I advised customer that I would enter his comments for the record and with the Docket in this matter. I thanked him for taking the time to let the Commissioners know his thoughts.

\*End of Comments\*

Date Completed: 3/10/2006

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